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## APPLICANTS

Matthew Parrish, Boise, ID ;  
 Jerry B. Decime, Eagle, ID ;

## \*\* CONTINUING DATA \*\*\*\*\*

*None at*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None at*

## IF REQUIRED, FOREIGN FILING LICENSE

GRANTED \*\* 11/22/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>Dal</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
ID	7	21	3

## ADDRESS

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## TITLE

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FILING FEE RECEIVED 728	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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